

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

## **Patent Application Transmittal**

Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450



Sir:

Transmitted herewith for filing is the Patent Application of:

Inventor: Daniel Joseph Buerkle et al.

For: IMAGE SCALING EM

IMAGE SCALING EMPLOYING HORIZONTAL PARTITIONING

## ASSIGNEE NAME: INTERNATIONAL BUSINESS MACHINES CORPORATION ASSIGNEE RESIDENCE: ARMONK, NEW YORK

Enclosed are:

40 Pages of Specification and 1 Abstract

6 Sheets of Drawings

 $\searrow$  Declaration and Power of Attorney (2)

An Information Disclosure Statement and form PTO/SB/08A

A certified copy of foreign application

Assignment of the invention to International Business Machines Corporation, Armonk,

New York 10504 (2)

The filing fee has been calculated as follows:

| Othe | r Than | Small | Entity |
|------|--------|-------|--------|
|------|--------|-------|--------|

| For:              | No. F          | Filed | No. Extra |
|-------------------|----------------|-------|-----------|
| Basic Fee         |                |       |           |
| Total Claims      | 27             | -20 = | 7         |
| Indep. Claims     | 3              | -3 =  | 0         |
| Multiple Depender | nt Claim Prese | nted  |           |

| Rate       | Fee      |  |
|------------|----------|--|
|            | \$770.00 |  |
| x \$18.00= | \$126.00 |  |
| x \$86.00= | \$ 00.00 |  |
| \$290.00   | \$ 00.00 |  |
| TOTAL      | \$896.00 |  |

**EXPRESS MAIL CERTIFICATE** 

Express Mail Label No.:

EV 407023191 US

Date:

December 4, 2003

I hereby certify that I am depositing the enclosed or attached paper with the U.S. Postal Service "Express Mail Post Office to Addressee" service on the above date, addressed to Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Patent Application Transmittal Attorney Docket No. ROC920030197US1

Deposit Account Authorization:

Please charge Deposit Account No. 09-0465 in the amount of \$896.00. A duplicate copy of this sheet is enclosed.

The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 09-0465. A duplicate copy of this sheet is enclosed.

 $\overline{X}$  Any additional filing fees required under 37 C.F.R. §1.16.

 $\overline{X}$  Any patent application processing fees under 37 C.F.R. §1.17.

Date: December 4, 2003

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